

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/594083

FILING DATE

13 MAY 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		/			
4	/		/			
5		1		1		
6		2		1		
7		1		1		
8	1		1			
9		1		1		
10		1		1		
11		1		1		
12	/			1		
13	/			1		
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TOTAL IND.	8	↓	5	↓		↓
TOTAL DEP.	7	←	11	←		←
TOTAL CLAIMS	15		16			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						